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CONFIRMATION NO. 7797

Bib Data Sheet

SERIAL NUMBER 10/805,015	FILING DATE 03/19/2004 RULE	CLASS 362	GROUP ART UNIT 2875	ATTORNEY DOCKET NO. 4875-00003
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APPLICANTS

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** CONTINUING DATA ***** *ju*This appln claims benefit of 60/480,340 06/20/2003 *ju*** FOREIGN APPLICATIONS ***** *ju*

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** 06/02/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	WI	DRAWING 8	20	2
Verified and Acknowledged	Examiner's Signature <i>ju</i>	Initials			

ADDRESS

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TITLE

Modular temporary lighting assembly

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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